## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

#### STATEMENT OF ECONOMIC INTERESTS

City of Proville

FAIR POCOVER PAGE PRACTICES COMMISSION

MAR 3 1 2011

lease type or print in ink.	P T Di 2 (Fixed)	Administration
• • •		(MIDDLE)
Chan-Wilcox / AKA: Wilcox	Thil	Υ
. Office, Agency, or Court		
Agency Name		
City of Oroville		
Division, Board, Department, District, if applicable	Your Position	
City Council	Council Member / V	ice Mayor
▶ If filing for multiple positions, list below or on an attachment.		
Agency: Redeviopment Agency	Position: Commissione	er
Jurisdiction of Office (Check at least one box)	· · · · · · · · · · · · · · · · · · ·	
☐ State	☐ Judge (Statewide Jurisdic	tion)
Multi-County	County of	
⊠ City of Oroville	·	
. Type of Statement (Check at least one box)	<b>.</b> <del></del> .	
Annual: The period covered is January 1, 2010, through E 2010.	December 31, Leaving Office: Date Le (Check one)	eft/
The period covered is/, through December 2010.	ecember 31, O The period covered is leaving office.	s January 1, 2010, through the date of
Assuming Office: Date/	<ul> <li>The period covered is of leaving office.</li> </ul>	s, through the date
Candidate: Election Year Office s	sought, if different than Part 1:	
Schedule Summary		
Check applicable schedules or "None."	► Total number of pages including	this cover page:3
Schedule A-1 - Investments – schedule attached		& Business Positions – schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts -	
Schedule B - Real Property - schedule attached	<u>—</u>	Travel Payments - schedule attached
•	or-	
☐ None - No repo	ortable interests on any schedule	
Verification		
WALLING ADDRESS		
Date Signed03-30-2011	Signatu	

### **SCHEDULE B** Interests in Real Property (Including Rental Income)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Chan-Wilcox, Thil Y.

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
1955 Montgomery Street	
CITY	CITY
Oroville CA 95965	
FAIR MARKET VALUE   S2,000 - \$10,000   F APPLICABLE, LIST DATE:   S2,000 - \$10,000   S10,001 - \$1,000,000   ACQUIRED   DISPOSED   DISPOSED	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Cther
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 <b>-</b> \$1,000 ☐ \$1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	lending institutions made in the lender's regular course blic without regard to your official status. Personal loans f business must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
Revocable Pierce-Monson Trust	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
500 Chinese Wall RD - Oroville, CA 95966	
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
Private Party	
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
▼ \$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable

## SCHEDULE A-1 Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

CALIFORNIA FORM 700  FAIR POLITICAL PRACTICES COMMISSION
Name
Chan-Wilcox, Thil Y.

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Oldies But Goodies	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail Sales	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000 <b>※</b> \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT    Stock   X Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership & Income Received of \$0 - \$499	Partnership   Income Received of \$0 - \$499   O Income Received of \$500 or More (Report on Schedule C)
O Income Received of \$500 or More (Report on Schedule C)	O lucotus Received of 2000 of work (Kebout on Pareame C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 S10,001 - \$100,000	S2,000 - \$10,000 S10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	MATHOT OF INDICATORS
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//_10
AGGGINED DIGI GGED	AGGCIRED DIGFOGED
► NAME OF BUSINESS ENTITY	➤ NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	(Describe)  Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IE ADDI KARI E LIGEDATE.	IS ADDI IOADI S. LIGT DATE
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
_	
Comments:	<u> </u>

#### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Chan-Wilcox, Thil Y.

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Oldies But Goodies	
Name P.O. Boix 804 - Oroville, CA 959656	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one  Trust, go to 2 Business Entity, complete the box, then go to 2	Check one  Trust, go to 2  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  Retail Sales	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Cver \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000
NATURE OF INVESTMENT Sole Proprietorship Partnership See Below  YOUR BUSINESS POSITION  NATURE OF INVESTMENT Partnership See Below Other YOUR BUSINESS POSITION	NATURE OF INVESTMENT Sole Proprietorship Partnership Other  YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
	S0 - \$499 S10,001 - \$100,000 OVER \$100,000 S1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  N/A	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST  Check one box:  INVESTMENT  REAL PROPERTY	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST  Check one box:    INVESTMENT   REAL PROPERTY
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
1955 Montgomery ST - Oroville, CA 95965	
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   \$10,001 - \$100,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   \$10,000   10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	
Yrs. remaining  Check box if additional schedules reporting investments or real property are attached	Yrs. remaining  Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

#### **SCHEDULE C** Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Chan-Wilcox, Thil Y.

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
N/A	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
S500 - \$1,000 S1,001 - \$10,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership	☐ Loan repayment ☐ Partnership
☐ Sale of	Sale of
(Property, car, boat, etc.)	(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describe)	Other(Describe)
<b>,</b>	
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	RIOD
* You are not required to report loans from commercial	l lending institutions, or any indebtedness created as part
of a retail installment or credit card transaction, made	
	your official status. Personal loans and loans received
not in a lender's regular course of business must be	disclosed as follows:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	ov Cal Name
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	
\$1,001 - \$10,000	City
S10,001 - \$100,000	Guarantor
OVER \$100,000	П ан
	Other(Describe)
Comments:	

## SCHEDULE D Income - Gifts



► NAME OF SOURCE ► NAME OF SOURCE N/A ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DESCRIPTION OF GIFT(S) \_\_\_\_\_\_ \$\_\_\_\_\_\_ ► NAME OF SOURCE ► NAME OF SOURCE ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DESCRIPTION OF GIFT(S) ➤ NAME OF SOURCE ► NAME OF SOURCE ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) Comments: \_\_\_\_\_\_

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
Chan-Wilcox, Thil Y.	

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

► NAME OF SOURCE	► NAME OF SOURCE
N/A	1
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (e)(3)
DATE(S):	DATE(S):
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
► NAME OF SOURCE	NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (e)(3)
DATE(S):	DATE(S):/ AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
DESCRIPTION:	DESCRIPTION:
Comments:	